# Jail-Huber Minutes 5-20-2013

### **Attending:**

Tom Reed (SPD)(chair)

Jeff Altenberg (Office of the District Attorney)

Sue Eckhart (Justice 2000)

Jean Geraci (Benedict Center)

Mike Hafemann, Michael.hafemann@milwcnty.com (HOC Superintendent)

Sheldyn Himle (Milwaukee Municipal Courts)

Nate Holton <a href="mailto:nholton@publicpolicyforum.org">nholton@publicpolicyforum.org</a> (CJC Coordinator)

Pete Koneazny (Legal Aid Society)

The Hon. Jeffrey Kremers (Courts)

Capt. Thomas Meverden, MCSO

Floyd Mitchell, Warden MSDF

Niel Thoreson, DOC

Mike Williams, DOC

Nichole Yunk Todd, WCS

## 1) May 10, 2013 Presentation

Tom Reed and Judge Kremers provided highlights of the May 10<sup>th</sup> meeting of Criminal Justice stakeholders at which results and analysis of first year and a half of using Universal Screening and Praxis:

- 100-125 per day less jail admissions under Universal Screening w/low, 10-13%, re-arrest rate.
- Projected benefit of screening has so far been born out.
- Used a two-month "snapshot" of 17 months of data.
- Very significant improvement a long time coming.
- Some exceptions to look at particularly a narrow "band" of misdemeanor defendants that had higher than expected FTA (failure to appear) rates. But the notable fact is that being able to identify this issue/phenomenon shows ability to use data to isolate subgroups for study and changes if needed.
- Screening is just the first part of the process. Screening is used *plus* the second part i.e. what we do with people and their screening information in making a release or non-release decision. This is the "Praxis" system portion. This converts screening score to release decision.
- We're releasing 75% and holding 25% of those screened.
- This is relevant to current proposal to reinstitute bail bondsmen practice bail bondsmen advocates are relying on a false promise to release more people. If we are, as we believe we are, making appropriate decisions about who can safely be released, releasing more is not a goal in itself
- Either they are making a false promise, or will be releasing the people we should be holding in based evidence based risk assessment.

- Proposal also ignores the fact that judges can and will raise bail amounts when they feel the need to not release someone: the math is easy to do if we want to set bail high enough so that the defendant cannot post 10%.
- We would just be substituting a self-interested private actor for data-driven evidence-based screening and release by elected judicial decision-makers.
- Under current approach, we are in fact doing very well in release decisions, based on FTA and new offense expectations and norms.
- Even with the misdemeanor group with a higher than desired FTA rate, there's an upside perspective: we count as "FTA" those who have actually stayed in touch with the courts and who we expect to see in court (e.g. missed a court date, but had a plausible reason identified by their attorney). So our FTA count may be an over-count in relation to how other jurisdictions (which may not be counted as FTA unless someone totally defaults on their entire case/obligation to appear). We apply same conservative approach to counting our felony FTAs, so our numbers there may be particularly impressive.
- We like our system of counting, even if it "over-reports" FTA, because it puts a focus on tracking individual behaviors, which we can then identify and address.
- Holly Szablewski did recent run and showed that FTA rate has in fact
  "plummeted" since the reported sample. Our way of counting allows a small
  group to skew the average in some samplings. Arrest rate of misdemeanor FTA
  for new offenses may be very low. Tom Reed noted that repeat FTA misd. Group
  has mental health issues.
- Compared to Milwaukee County's past, we now have data baseline to watch trends.
- We have already looked at strategies to reduce FTA:
- Will be looking at penalizing first no-show on P.R. bond.
- Will move from 2 weeks to 1 week span for setting "next appearance" date (as much as it may require lawyers to speed up work, practical result is that we lose more people if the lag between court dates is longer).
- Speeding cases will also reduce FTA. If plea expected, get it done same day or very soon, not 60 days. Shorter time frames, fewer continuances, the lower number the FTAs.
- Usually the quick date is best all around, w/ exception of drunk-driving cases, which may involve some useful delays for setting up programs etc..
- Pre-trial dates need to be effective pretrial has to resolve all issues and either set trial or otherwise dispose.
- Overall, good appraisal/reviews from May 10th meeting.
- Can't emphasize enough the importance of data-based system.
- Notable and "disturbing" is that 23% of total jail admission was in broad category of Domestic Violence.
- Note re data, the sample is not 100% inclusive; i.e. no counted in our screening/Praxis data set if they do not go through the jail e.g. if arrested and sent to DA or for appearance directly in out of custody court, w/o going to jail.

### 2) Changes in the Jail & HOC Administration alignments.

- Q. to Capt. Tom Meverden. He has back on jail duty, from Courts duty, only one week.
- Inspector Nyklewicz has taken different post that Capt. M. has taken over.
- Re-constructing classification system, and have made some personnel changes.
- Classification is key area, trying to bring in people with experience.
- "Classification" explained placement in the institution based on a person's record, institutional history, medical, interview results.
- There has continued to be some pretrial people sent to HOC, but the number has been lower than in the past.
- Daily count has approached or slightly exceeded the *Christensen* cap number, but has been addressed.
- They are trying to not move people to HOC who have not yet made their initial appearance so we can avoid sending people to HOC who will have to be bused back.
- Population Statistic/Chart concerns: problem in that chart of population subgroups is based on their status *at the time of booking* and sometimes with someone's judgment call to adjust to what the correct status is perceived to be. Some are inaccurate e.g. where someone is "pre-trial" but also had a sentence, this might have showed up as pretrial only.
- Discussion- DA, LAS, SPD emphasized value of communication for problem solving in transition.

## **House of Correction – Superintendent Hafemann:**

- Now all but maybe 20 sentenced people are HOC as opposed to the pretrial (Jail) facility.
- Some jail overflow at HOC, some w/ VOPs, some sanction inmates from state
- Will try to get the MOU re housing state "sanctions" population converted to an agreement with the HOC rather than Sheriff.
- Some problems in the transition of some "high bail" pretrial people being sent down to HOC that should have been kept at the higher security Jail.
- Still working to get housing units open.
- Communication among and with all agencies is a high priority.
- Shifting of personnel and other issues being addressed
- The Superintendent has added a visit day, now up to 3 per week and children are allowed to visit, if accompanied and the visit is pre-scheduled.
- Phone system added to ease ability to arrange visits. Switch to a phone system was needed because the Sheriff shut down computer system for HOC visits during the change.
- Next week, Huber people will be put on EM.
- AODA has been expanded had been only for DOTS
- DOTS has been cancelled because not cost-effective

• Women emphasized b/c they were excluded from AODA when it was DOTS only.

## **Medical – Status post Armor contract**

- Bad transfer decisions (people sent to HOC where medical care at jail called for) were an early issue that has now been addressed.
- Armor is operating under a bi-furcated authority structure: Armor deals with the Sheriff for health care in the Jail and with the Superintendent for the HOC.
- Medical Director and Medical Administrator, positions that were vacant for long period of time, are now filled by Armor employees.
- Infirmary reinstituted at HOC.
- So far so good at HOC and Jail.
- Pink jumpsuit practice is being reviewed.
- Inmates w/ mattresses taken away practice is d/c'd.
- Tom R emphasized communicating policy changes e.g. so lawyers don't go to HOC when someone is sent to CJF.

#### **Corrections – Neil Thoreson/Mike Williams:**

- Last meeting it was reported that there has been a lower number of sanction people incarcerated
- Mr. Thoreson has some data, not all gathered yet, but some snapshots available.
  - o April 2013: 83 revoked ES, 73 w/ new criminal behavior "flag" (not rule only, but not necessarily affirmed as a new "crime").
  - May be able to pull out those more likely to represent a new criminal charge.
  - o 34 revoked for rules violations, about 80 for new offenses.
  - Numbers/reality of rule violation revocation/sanction vs. new offense is somewhat skewed by the sex offender contingent – high % of their revocation are for rule violations.
  - o Numbers about equal to last year.
  - o Early intervention grant issue raised: how to look at unified disposition of new alleged offense with ATR decision.
  - o DOC is working on the possibility of DA office liaison on ATRs.
  - Improvement in putting people into ATRs and treatment hope to work w/ HOC re treatment for VOPs at HOC.

#### **Miscelleneous Notes:**

 Tom R. noted that we are starting to collect data and calculate costs of jailing/treatment of "chronic consumers" of jail/MH resources. Cost calculated (very high) for top 100.

- Trying to catch MH cases at front end using "critical care" model. It would be good to incorporate/connect this approach w/ DOC as part of the picture. Early intervention should present opportunities.
- o Tom and Neil Thoreson agreed that decompensation episodes in custody are to be avoided.
- o Liaison with the DA on ATRs should have mental health knowledge.
- Early intervention in CJ system is under way: identifying the chronic consumers and developing the protocol to work together: courts, D.A.s, defenders, CIT and BHD.
- Still work to be done in ID-ing MH issues at front end. If grant is approved, we hope to have Early Intervention program by November 1.
- o 6-9 months to have mental health ID project in place.

Meeting Adjourned at 9:25 a.m.